

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation COMMON SENSE ISSUES INC		3. FEC Identification Number C C90009739
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 8190-A BEECHMONT AVENUE 103		
(c) City, State and ZIP Code CINCINNATI OH 45255		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☒ 24-Hour Notice ☐ 48-Hour Notice
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M	M
1	0

 /

D	D
2	4

 /

Y	Y	Y	Y
2	0	0	8

THROUGH

M	M
1	0

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	8

6. TOTAL CONTRIBUTIONS 5500.00

7. TOTAL INDEPENDENT EXPENDITURES..... 5500.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Patrick Davis

10/31/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-A
ITEMIZED RECEIPTS

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF FILER (In Full)

COMMON SENSE ISSUES INC

A. Full Name (Last, First, Middle Initial)

Richard Sugden

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

Mailing Address

P.O. Box 2468

Transaction ID: F56.4099

City

Jackson

State

WY

Zip Code

83001

Amount of Each Receipt this Period

FEC ID number of contributing
federal political committee.

C

5500.00

Name of Employer

Family Practice Associates

Occupation

Medical Doctor

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page carry total to Line 6)

5500.00

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **3 / 3**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

COMMON SENSE ISSUES INC

Full Name (Last, First, Middle Initial) of Payee
Joseph David Advertising

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

Mailing Address

333 North Michigan Avenue

Amount

5500.00

City

Chicago

State

IL

Zip Code

60601

Purpose of Expenditure

Radio Ad - Hometown Girl - Media Buy

Category/
Type

Office Sought:

☒

House

State: WY

House

☐

Senate

☐

President

District: _____

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Cynthia Lummis

Calendar Year-To-Date Per Election
for Office Sought

5500.00

Disbursement For:
2008☐

Primary

☒

General

☐ Other (specify) _____(a) **SUBTOTAL** of Itemized Independent Expenditures

5500.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

5500.00